FORM (RF-3)

SUMMARY SHEET

Change in Company's prem	ium or rate level produced b	y rate revision
effective June 1, 2015		
(1)	(2)	(3)

*	(1)		(2) Annual Premium	(3) Percent
-	Coverage		Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Pr	ivate	-	
	Passenger			ta 110
_	Commercial		# W.	
2	Automobile Physical D	amag		•
	Private Passenger		***************************************	
_	Commercial			***************************************
3.	Liability Other Than Au	ito	773,180	+0.10
4.	Burglary and Theft			HERMAN HARMAN
5.	Glass			
6. 7	Fidelity			White beautiful and the second
7.	Surety			
8.	Boiler and Machinery		<u></u>	
9.	Fire		- Marie and the state of the st	
10. 11.	Extended Coverage			
12.	Inland Marine			
13.	Homeowners		4-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
13. 14.	Commercial Multi-Peril			***************************************
14. 15.	Crop Hail			
15.	Other			
	Life of Insurance	e		
•	Does filing only apply to Classes? If so,	o certa	in territory (territories) or o	certain
	specify:	No		
	Brief description of filin	ig. (If f	iling follows rates of an ad	visory
	Organization, specify	•		•
	organization):		Adopt ISO's revised multist	ate deductible discount factor
	er.			
				TO STREET THE TAXABLE PARTY.
	*Adjusted to reflect all			
		's prem	nium level which will result	from application of new
	rates.		AYA Insurance Con	nany

AXA Insurance Company
Name of Company
Linda Gross, Corporate Secretary
Official – Title

FORM (RF-3)

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		The state of the s
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto	12,955,700	+7%
4.	Burglary and Theft		
5.	Glass		WHAT ARE
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		-
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: The filing wi	Il effect all insureds. The impacts will vary t	by Size of Firm, Experience rating history, and firms
	disciplinary actions,		
	Brief description of filing. (If fi	ling follows rates of an a	dvisory
	Organization, specify		
	organization):	Size of Firm Factor factor changes,	increasing of Experience Rating Debits, and increase in
	Disciplinary Action Surcharge.		Mile Marie M
	*Adjusted to reflect all prior ra	te changes	
	**Change in Company's prem		It from application of new
	rates.		
		CNA Insurance	
		Na	me of Company
			Official - Title

Cha	ange in Company's premium or rate le	vel produced by rate revision ef	fective	6/1/2015
	(1)	(2) Annual Premium		(3) Percent
	Coverage	Volume (Illinois)*		<u>Change (+ or -)**</u>
1.	Automobile Liability Private			
	Passenger Commercial			
2.	Automobile Physical Damage			
	Private Passenger Commercial			
3.	Liability Other Than Auto	\$	96,062	0.1%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire	·		
	Extended Coverage		 -	
	Inland Marine		 _	
	Homeowners			
	Commercial Multi-Peril	\$	96,627	0.1%
	Crop Hail			
15.	Other			
	Line of Insurance			
Dog	es filing only apply to certain territory (territories) or certain classes? If	so specify:	No
D00	es ming only apply to certain territory (territories) of our ann diagons. In		
	ef description of filing. (If filing follows r			
the o	deductible discount factors in ISO Reference Fili	ng # GL-2014-RDD14 with no change to	our loss cost multip	lier.
	ljusted to reflect all prior rate changes.			
C	hange in Company's premium level w	nich will result from application of	or new rates.	
			Carm 9 Forests	or Indomnity Company
				er Indemnity Company of Company
			Marrie	от Сопірану
			Michele Raeible - \	Vice President and Actuary
				cial Title
			0	

Ch	ange in Company's premium or rate le	vel produced by rate revision eff	ective	4/1/2015
	(1)	(2) Annual Premium		(3) Percent
	<u>Coverage</u>	Volume (Illinois)*		Change (+ or -)**
1.	Automobile Liability Private			
•	Passenger Commercial			
2.	Automobile Physical Damage			
	Private Passenger Commercial			
3.	Liability Other Than Auto	\$	96,062	-14.2%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity		<u> </u>	
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
	Extended Coverage			<u> </u>
11.	Inland Marine			
	Homeowners			
	Commercial Multi-Peril	\$	96,627	-14.2%
	Crop Hail			
15.	Other			
	Line of Insurance			
D		e-vitevice) or portain alaboac? If	aa aaaaifu	N1
DO	es filing only apply to certain territory (t	emiones) or certain classes? If	so, specify:	No
Brie	ef description of filing. (If filing follows r	ates of an advisory organization	, specify organizatio	n): We are filing to adopt
	latest loss cost changes in ISO Reference Filing			
		•	•	
*Ac	djusted to reflect all prior rate changes.			
**C	change in Company's premium level wh	nich will result from application o	f new rates.	
			Crum & Forster Inder	mnity Company
			Name of Co	mpany
			Michele Raeihle - Vice Pr	"
			Official –	Title

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	evel produced by rate revision effective	10/01/2014
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
Liability Other Than Auto	175,000	-2%
Burglary and Theft	110,000	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		<u> </u>
9. Fire		
10. Extended Coverage		
11. Inland Marine	11114	
12. Homeowners		
13. Commercial Multi-Peril14. Crop Hail	<u> </u>	
15. Other		· · · · · · · · · · · · · · · · · · ·
Line of Insurance		
		
Does filing only apply to certain territory (territories) or certain classes? If so, specify	: <u>No</u>
	<u></u>	
		1
	rates of an advisory organization, specify o	
Adoption of ISO rule - RP-2014-RGL14		
*Adjusted to reflect all prior rate changes		
	hich will result from application of new rate:	S.
-		
	Everest Na	ational Insurance Company
		Name of Company
	Shirania Fer	nandez, Associate Manager
	Jimane i ei	Official – Title

ILLINOIS

SUMMARY SHEET (Form RF- 3)

	Change in Company's premium or rate level pr	roduced by rate revision effective	11/3/2014
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
١,	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
,	Commercial	\$427.200	3.7%
	Liability Other Than Auto	\$427,309	3.170
	Burglary and Theft Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
0.	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
5.	Other		
	Line of Insurance		
	Does fling only apply to certain territory (territo	ries) or certain classes? If so, spec	eifv:
	No	· ·	
	Brief Description of filing (If filing follows rates Revised base rates for all coverages. Revised classification factors for all available of Add two new classifications: Interior Decorator	classes.	
*	Adjusted to reflect all prior rate changes. Change in Company's premium level which will	Il result from the application of new	rates.
		FIRST CHICAGO INSURANC Name of Compan	
		•	
	_	Jennifer Faley - Senior Pricing & F	Reserving Analyst
		Official - Title	

FORM (RF-3)

	effective 6/1/2015		(0)
	(1)	(2)	(3)
	_	Annual Premium	Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	2,039,979	+0.03%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
	Inland Marine		
	Homeowners		
. — .	Commercial Multi-Peril		
	Crop Hail		-
	Other		
10.	Life of Insurance		-
	Life of trisulative		
	Does filing only apply to certain to	erritory (territories) or cert	rain
	Classes? If so.	simoly (torritorios) or som	
	specify: N/A		
	specify. NA		
	Brief description of filing. (If filing	follows rates of an adviso	orv
	Organization, specify	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	organization): ISO Filing ID GL-2014-RI	DD14	
	organization). 130 Filling to GC-2014-Ki	5014	
	· · · · · · · · · · · · · · · · · · ·		
	*Adjusted to reflect all prior rate of	hanges.	
	**Change in Company's premium	-	m application of new rates.
	onengo m osmpan, o promien		
		General Casualty In:	surance Company
	,		Name of Company
		Janet Kiger	
			Official – Title

FORM (RF-3)

	(1)	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Coverage Automobile Liability Private	Volume (minors)	Change (+oi-)
١.	•		
	Passenger Commercial		
2.	Automobile Physical Damage		
٠.	•		
	Private Passenger Commercial		
,		005 540	(0.078)
3.	Liability Other Than Auto	905,540	+0.07%
1 .	Burglary and Theft	-	
5.	Glass		
3. -	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		_
	Extended Coverage		
	Inland Marine		
	Homeowners		
3.	Commercial Multi-Peril		_
4.	Crop Hail		<u> </u>
5.	Other		
	Life of Insurance		
	Does filing only apply to certain to Classes? If so, specify: N/A	erritory (territories) or cer	tain
	Brief description of filing. (If filing	follows rates of an advis	orv
	Organization, specify		,
	organization): ISO Filing ID GL-2014-RI	OD 14	
	organization). 100 ming ib 02 20 1711		
	*Adjusted to reflect all prior rate of	changes.	
	**Change in Company's premium		om application of new rates
			ompany of Wisconsin
			Name of Company
		Janet Kiger	
			Official — Title

FORM (RF-3)

(1)	(2) Annual Premium	(3) Percent
Coverage	 Volume (Illinois) * 	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger	And the second s	
Commercial		
Liability Other Than Auto	S313,275	-11.0%
Burglary and Theft		
Glass		· · · · · · · · · · · · · · · · · · ·
Fidelity	**************************************	
Surety Reiler and Machinery		
Boiler and Machinery Fire		
Extended Coverage		
Inland Marine	**************************************	
Homeowners		White the second
Commercial Multi-Peril		
Crop Hail		(1
Other		O
Line of Insurance		
Does filing only apply to cert Classes? If so,	ain territory (territories) or	certain
•	adopting ISO circulars	
Brief description of filing. (If	filing follows rates of an a	ıdvisory
Organization, specify		
organization):	Adopting ISO circular GL-	2013-BGL1
*Adjusted to reflect all prior r		A
**Change in Company's prer rates.	mium level which will resu	ilt from application of ne
	Great Midwest Ins	urance Company

	Change in Company's pre revision effective	mium or rate level produced by rate April 1, 2015	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
۱.	Automobile Liability		
	Private Passenger		
	Commercial		
	Automobile Physical Damage		
	Private Passenger		
	Commercial		
	Liability Other Than Auto	\$45,610	14.2%
٠.	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
3.	Boiler and Machinery		
	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	s Filing only apply to certain territo ses? If so, specify: This add	ry (territories) or certain option applies to the HDI-Gerling Er	nergi Program only.
	f description of filing. (If filing follo anization, specify organization):	ws rates of an advisory Adoption of ISO's Commercial G Reference Filing Number GL-201	
*	 * Adjusted to reflect all prior rate c * Change in Company's premium I result from application of new rat 	evel which will	
			_
			a Insurance Company
		Name of	Company
		Kevin Purcel	I - VP IRC, LLC
			al - Title

FORM (RF-3)

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability F		Change (+01-)
•	ivale	
Passenger Commercial		
Automobile Physical	Jamag	
Private Passenger		
Commercial		
iability Other Than A	uto \$159,754	-11.0%
Burglary and Theft	***************************************	
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
nland Marine		
Homeowners		
Commercial Multi-Per	1	
Crop Hail		
Other	**************************************	0
Line of Insurar	ce	**************************************
Does filing only apply Classes? If so,	to certain territory (territories) or	certain
specify:	N/A – adopting ISO circulars	
Brief description of fil	ng. (If filing follows rates of an a	advisory
Organization, specify	- · · · · · · ·	-
organization):	Adopting ISO circular GL	-2013-BGL1
_		
*Adjusted to reflect a **Change in Compan	prior rate changes. y's premium level which will resu	ılt from application of n

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag	9	
Private Passenger		
Commercial		
Liability Other Than Auto	696875	-14.2
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		W. 11 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Line of Insurance		
Does filing only apply to cer	tain territory (territories) or	certain
Classes? If so, specify: N/A		
specify: N/A	· · · · · · · · · · · · · · · · · · ·	
Brief description of filing. (I	f filing follows rates of an ac	dvisory
Organization, specify		•
organization):	Adoption of ISO revision	
-		

Mid-Continent Casualty Company Name of Company Compliance Filing Analyst Official - Title

rates.

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	9,794000	-2.3
3. 4.	Burglary and Theft	9,794,.000	-2.3
4. 5.	Glass		
<i>5</i> .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
<u></u>	Line of Insurance	territories) or certain classes? If so, specify:	
lo_ ief	Line of Insurance	es rates of an advisory organization, specify	
No_	Line of Insurance	es rates of an advisory organization, specify	
rief Nati	Line of Insurance	es.	
rief Nati	Line of Insurance Tiling only apply to certain territory (description of filing. (If filing follow onal Casualty Company is Adopting djusted to reflect all prior rate chang hange in Company's premium level of the company is discovered to the company of the company is premium level	es. which will	organization):
ief Nati	Line of Insurance Tiling only apply to certain territory (description of filing. (If filing follow onal Casualty Company is Adopting djusted to reflect all prior rate chang hange in Company's premium level of the company is discovered to the company of the company is premium level	es. which will	organization):
rief Nati	Line of Insurance Tiling only apply to certain territory (description of filing. (If filing follow onal Casualty Company is Adopting djusted to reflect all prior rate chang hange in Company's premium level of the company is discovered to the company of the company is premium level	es. which will	organization):
ief Nati	Line of Insurance Tiling only apply to certain territory (description of filing. (If filing follow onal Casualty Company is Adopting djusted to reflect all prior rate chang hange in Company's premium level of the company is discovered to the company of the company is premium level	es. which will Nation	nal Cassualty Company Name of Company
ief Nati	Line of Insurance Tiling only apply to certain territory (description of filing. (If filing follow onal Casualty Company is Adopting djusted to reflect all prior rate chang hange in Company's premium level of the company is discovered to the company of the company is premium level	es. which will Nation	nal Cassualty Company Name of Company sa Medina - State Filing

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or	rate level produced by rate revision
effective 04/01/2015	•

	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		
	Commercial		
	Liability Other Than Auto	\$4,668,418	-14.2
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire ·		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
	Does filing only apply to certain Classes? If so,	in territory (territories) or	certain
	specify: Applies to	Prem/Ops and Products Com	pleted Operations classes.
	Brief description of filing. (If fil Organization, specify	ling follows rates of an a	advisory
	organization):	Adoption of ISO CGL loss	s costs
	,		

New York Marine and General Insurance Company
Name of Company
Cecelia Puglio - Director - Underwriting Process Compliance
Official - Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate revision effective			ective	6/1/2015
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *		(3) Percent Change (+ or -)**
1.	Automobile Liability Private			
	Passenger Commercial			
2.	Automobile Physical Damage			
	Private Passenger Commercial			
3.	Liability Other Than Auto	\$	145,963	0.1%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			·
7.	Surety	. <u> </u>	 -	<u> </u>
8.	Boiler and Machinery			
9.	Fire			
	Extended Coverage		 -	
	Inland Marine			<u> </u>
	Homeowners			·
	Commercial Multi-Peril	\$	143,644	0.1%
	Crop Hail			
15.	Other		 -	·
	Line of Insurance			
Doe	es filing only apply to certain territory (t	erritories) or certain classes? If	so, specify: _	No
Brie	ef description of filing. (If filing follows r	ates of an advisory organization	, specify organ	ization): We are filing to adopt
the c	deductible discount factors in ISO Reference Filin	g # GL-2014-RDD14 with no change to	our loss cost multip	olier.
	justed to reflect all prior rate changes. hange in Company's premium level wh	nich will result from application o		er Insurance Company
			Name	of Company
				Vice President and Actuary
			Off	icial – Title

Change in Company's premium or rate level produced by rate revision effective _			ffective	4/1/2015
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>		(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private			
	Passenger Commercial			
2.	Automobile Physical Damage			
_	Private Passenger Commercial			
3.	Liability Other Than Auto	\$	145,963	
4.	Burglary and Theft		 	
5.	Glass			
6.	Fidelity			
7.	Surety			
8. 9.	Boiler and Machinery Fire			
	Extended Coverage			
	Inland Marine			
	Homeowners			
	Commercial Multi-Peril		143.644	-14.2%
	Crop Hail	4	143,044	-17.270
	Other			
-	Line of Insurance			
Do	es filing only apply to certain territory (to	erritories) or certain classes? If	so, specify:	No No
Deid			:6.	
	ef description of filing. (If filing follows ra atest loss cost changes in ISO Reference Filing #			- 4
uiei	atest loss cost changes in ISO Reference Filling #	GL-2014-BGET Will TID Glange to our	ioss cost multiplie	at.
*Ad	ljusted to reflect all prior rate changes.			
	hange in Company's premium level wh	ich will result from application	of new rates.	
			The North R	liver Insurance Company
			Nai	me of Company
			Michele Raeihle	- Vice President and Actuary
				Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium of	or rate level	produced by rate	revision
effective April 1, 2015	*		

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automo	bile Liability Privat		Change (+or-)
Passen			
Comme	_		
	bile Physical Dam	30	
	Passenger	-9	•
Comme	-		Control of the Contro
Liability	Other Than Auto	302,498	-14.2%
	y and Theft	de la companya de la	
Glass			
Fidelity			
Surety			
Boiler a	nd Machinery		
Fire			
	ed Coverage		
. Inland N			
Homeo			,
	ercial Multi-Peril		
. Crop Ha	311		
. Othe <u>r</u>		***************************************	
1	Line of Insurance		
	s? If so,	ertain territory (territories) or	certain
Brief de	escription of filing	(If filing follows rates of an a	dvison
	zation, specify	(II lilling follows faces of arra-	441307y
organiz		Nova Casualty Company is ac	dopting ISO Reference Filing GL-2014-BGL1
•	ing its loss cost multiplier	to 1.700.	
	ed to reflect all pric ge in Company's p	or rate changes. oremium level which will resul	It from application of new
iales.		Nova Casualty Cor	mpany
			me of Company
		Susan E Allen, Vice	• •

Official - Title

FORM (RF-3)

	(1)	(2) Annual Premium	(3) Percent		
	Coverage	Volume (Illinois) *	Change (+or-) **		
1.	Automobile Liability Private				
	Passenger				
_	Commercial				
2.	Automobile Physical Damage				
	Private Passenger				
_	Commercial				
3.	Liability Other Than Auto	3,056,185	+0.06%		
4.	Burglary and Theft	-			
5. -	Glass		_		
S.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
	Extended Coverage				
	Inland Marine	-			
	Homeowners		-		
	Commercial Multi-Peril				
	Crop Hail	-			
15.	Other				
	Life of Insurance				
	Does filing only apply to certain to	erritory (territories) or cer	tain		
	Classes? If so,				
	specify: N/A				
		Brief description of filing. (If filing follows rates of an advisory			
	Organization, specify				
	organization): ISO Filing ID GL-2014-RI	DD14			
	*Adjusted to reflect all prior rate of	phongoe			
	**Change in Company's premium		om application of new rates.		
		Regent Insurance C	Company		
			Name of Company		
		Janet Kiger	F		
			Official – Title		

ı	Change in Company's premium or rate	e level produced by rate revision effect	tive 10-02-14
	(1)	(2)	(3) Percent
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	4,098,000	-2.3
4.	Burglary and Theft		
5.	Glass	· 	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		<u></u>
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oes f No	* * * * * * * * * * * * * * * * * * * *	erritories) or certain classes? If so, spe	cify:
. 10			
	description of filing. (If filing follows sdale Indemnity Company is Adoptin	rates of an advisory organization, speng ISO filing CF-2014-RLA1.	cify organization):
* C	djusted to reflect all prior rate changes hange in Company's premium level w sult from application of new rates.		
		<u></u>	cottsdale Indemnity Company
			Name of Company
		N	1elissa Medina - State Filing
		_ <u>A</u>	nalyst
			Official Tists

Chang	ge in Company's premium or rate le	evel produced by rate revision effective 4/1/201	5
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. A	Automobile Liability Private		
^ .	Passenger Commercial		
2. A	Automobile Physical Damage Private Passenger Commercial		
	iability Other Than Auto	\$ 3,191	-3.2%
4. E	Burglary and Theft		
-	Blass		
6. F	Fidelity		
	Surety		
	Boiler and Machinery		
	rire		
	Extended Coverage		
	nland Marine		
	lomeowners		
	Commercial Multi-Peril		
	Crop Hail		
15. C			
	Line of Insurance		
Does	filing only apply to certain territory (territories) or certain classes? If so, specify:	N/A
	9, -4,		
	description of filing. (If filing follows 4-BGL1	rates of an advisory organization, specify orga	anization): Insurance Services Office (ISO)
		<u></u>	
	sted to reflect all prior rate changes inge in Company's premium level w	hich will result from application of new rates.	
			nsurance Company (TNUS)
			Name of Company
		Bruce Ada	ns. VP Corporate Underwriting
			Official – Title

Change in Con	npany's premium or rate le	vel produced by rate revi	sion effective 4/1/2015	
	(1) Coverage	(2) Annual Prem <u>Volume (Illin</u>		(3) Percent <u>Change (+ or -)**</u>
	le Liability Private			
2. Automobil	enger Commercial le Physical Damage e Passenger Commercial			
	ther Than Auto	\$	350,880	-0.9%
4. Burglary a				
5. Glass				
6. Fidelity			······································	
7. Surety		<u> </u>		
8. Boiler and	l Machinery			
9. Fire	•			
10. Extended	Coverage			
11. Inland Ma	rine			
12. Homeown	iers			
13. Commerci	ial Multi-Peril			
14. Crop Hail				
15. Other				
	Line of Insurance			
Does filing only	y apply to certain territory (erritories) or certain clas	ses? If so, specify:	N/A
J .	, April 3 av a	,	, , , , .	
Brief descriptio GL-2014-BGL1	on of filing. (If filing follows	ates of an advisory orga	nization, specify organ	nization): Insurance Services Office (ISO)
	eflect all prior rate changes. ompany's premium level wi	nich will result from appli	cation of new rates.	
			Takia Marina Ame	erica Insurance Company (TMAIC)
				Name of Company
			Druge Adem	- VP Comprete Lindenwittee
			Bruce Adam	s, VP Corporate Underwriting Official – Title
				Official - Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2) Annual Premium Valuma (Illinaia)*	(3) Percent Change (<u>+ or -)**</u>
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)
Automobile Liability Private Passenger Commercial		
 Automobile Physical Damage Private Passenger Commercial 		
3. Liability Other Than Auto	\$ 119,850	2.8%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	N/A
	<u></u>	
Brief description of filling, (If filling follow	s rates of an advisory organization, specify orga	nization): Insurance Services Office (ISO)
CL 0014 DCL4		
*Adjusted to reflect all prior rate change		
**Change in Company's premium level	which will result from application of new rates.	
	Trans Paci	ic Insurance Company (TPI)
		Name of Company
	Bruce Adam	s, VP Corporate Underwriting
		Official - Title

Change in Company's premium or rate level produced by rate revision effective _			effective	6/1/2015
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *		(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private			
	Passenger Commercial			
2.	Automobile Physical Damage	-	_	
	Private Passenger Commercial			
3.	Liability Other Than Auto	\$	184,329	0.1%
4.	Burglary and Theft			
5.	Glass	··-		
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery	· · · · · · · · · · · · · · · · · · ·		
9.	Fire			
	Extended Coverage			
	Inland Marine		<u></u>	
	Homeowners			
	Commercial Multi-Peril	\$	488,424	0.1%
	Crop Hail	- <u> </u>		
10.	Other			
	Line of insurance			
Do	es filing only apply to certain territory (t	erritories) or certain classes?	If so, specify:	No
	ef description of filing. (If filing follows randeductible discount factors in ISO Reference Filing			
	ljusted to reflect all prior rate changes.	ich will result from application	n of new rates.	
Ī	, , ,	, ,		
			United States	Fire Insurance Company
			Nam	e of Company
			Michele Raeihle -	Vice President and Actuary
				ficial – Title

Change in Company's premium or rate	level produced by rate revision effective	4/1/2015
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto	\$ 184,329	-14.2%
Burglary and Theft	Ψ 101,020	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	\$ 488,424	-14.2%
14. Crop Hail		•
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, spe	cify: No
		· ·
	s rates of an advisory organization, specit	
the latest loss cost changes in ISO Reference Filin	g # GL-2014-BGL1 with no change to our loss cost	multiplier.
+ a - 15 construit de la conflación de l	_	
*Adjusted to reflect all prior rate change		-1
"Change in Company's premium level	which will result from application of new r	ates.
	11-2	d Olahan Pina Indonesia O
	United	d States Fire Insurance Company
		Name of Company
	المالية	Posible Mas President and Antonia
	Michele	Raeihle - Vice President and Actuary Official - Title
		Ollical - Tille